

## Kentucky Department for Medicaid Services

### Drug Review Options

The following chart lists the agenda items scheduled for review at the November 20, 2003, meeting of the Pharmacy and Therapeutics Advisory Committee and options that were submitted for review.

Item	Options for Consideration
<b>Tablet Splitting</b>	<ol style="list-style-type: none"><li>1. Place a Prior Authorization on Celexa 10mg tablets.</li><li>2. Place a maximum daily limit on Celexa 20mg tablets of 0.5 tablet per day.</li><li>3. Place a maximum daily limit on Celexa 40mg tablets of 1.5 tablets per day.</li><li>4. Place a Prior Authorization on Lexapro 10mg tablets with a maximum daily limit of 1 tablet per day.</li><li>5. Place a maximum daily limit on Lexapro 20mg of 1 tablet per day.</li><li>6. Place a Prior Authorization on Zoloft 25mg tablets.</li><li>7. Place a maximum daily limit on Zoloft 50mg tablets of 0.5 tablet per day.</li><li>8. Place a maximum daily limit on Zoloft 100mg tablets of 2 tablets per day.</li><li>9. Exclude recipients residing in Long Term Care facilities from the restrictions above.</li></ol>
<b>Proton Pump Inhibitor Update</b>	<ol style="list-style-type: none"><li>1. All PPI's are equivalent.</li><li>2. Maintain the most cost-effective agent as the preferred PPI (currently Prilosec OTC).</li><li>3. Select a Prior Auth Preferred PPI (Based on lowest net cost via supplemental rebate).</li><li>4. Maintain H2 Antagonists as first-line.</li><li>5. Maintain the 12-week duration limit for all PPI's.</li></ol>

The following terms will be utilized within the therapeutic monograph to classify medications during Drug Class Reviews. By using these terms, the reviewer will be able to easily identify any clinical differences between the medications within the class being reviewed.

Superior - Following evidence-based review, it is determined that the drug provides a therapeutic advantage, in terms of safety and/or efficacy, over other available products within the same treatment modality.

Novel - Following evidence-based review, the drug is therapeutically equivalent in both safety and efficacy, but represents a new therapeutic option, which expands the treatment modality.

Equivalent - Following evidence-based review, it is determined that the drug is therapeutically equivalent in both safety and efficacy to other available products within the same treatment modality.

Not Essential - Following evidence-based review, it is determined that the drug has no therapeutic advantage, due to either reduced safety or efficacy, over other available products within the same treatment modality.